



ND

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October 30, 2019

United States Environmental Protection Agency, Region 8, Air Program
Office of Enforcement, Compliance and Environmental Justice
Air Toxics and Technical Enforcement Program, 8ENF-AT
1595 Wynkoop Street
Denver, Colorado 80202

Re: NSPS OOOOa Annual Report – Collection of Fugitive Emission Components at a Well Site
Arrow Central Salt Water Disposal Well and State of North Dakota #16 Salt Water Disposal
Well
Arrow Water, LLC

Dear Sir or Madam,

Arrow Water, LLC a subsidiary of Crestwood Midstream Partners LP, is submitting the New Source Performance Standard (NSPS) Subpart OOOOa Annual Report for the period of August 3, 2018 to August 1, 2019. This report includes information on the collection of fugitive emission components located at a well site in order to comply with 40 CFR §60.5420a (b)(1) and (7).

Subpart OOOOa applies to owners and operators of affected facilities where construction, modification or reconstruction commenced after September 18, 2015. Arrow Water, LLC constructed a new well at the Arrow Central Salt Water Disposal site ("the Site") on May 7, 2018 as stated in a startup notification dated May 9, 2018. Per §60.5365a(i)(3)(i), the new well is considered a modification to the existing site; therefore, the collection of fugitive emission components at the Site are considered an affected facility and are applicable to reporting requirements described in §60.5420a.

Per §60.5430a; applicable fugitive emissions components monitored at this site included valves, connectors, pressure relief devices, open-ended lines, flanges, instruments, and meters. Emissions originating from thief hatches at this site are not considered fugitive emission sources as these vessels are not controlled, and are not subject to NSPS OOOO/OOOOa as these do not have the potential to emit 6 tpy VOC emissions. Arrow Water, LLC does not operate any gas wells, centrifugal or reciprocating compressors or pneumatic pumps or controllers that would be considered affected facilities.

Connections
for America's
Energy

Fugitive emissions components were observed at this site using OGI monitoring as described in §60.5397a(a). A complete report of components for which fugitive emissions were detected is attached for your review.

If you have any questions or require additional information, please contact me at (713) 380-3243.

Regards,

(b) (6)

A large black rectangular redaction box covers the signature area.

Mitch Lagerstrom
Air Quality Specialist, Arrow Water

Cc: North Dakota Department of Environmental Quality
Curt Van Hoorn, Arrow
Dean Volesky, Arrow

Attachments



OMB No. 2060-0336,
Approval Expires 05/31/2019

Federal Operating Permit Program (40 CFR Part 71)
CERTIFICATION OF TRUTH, ACCURACY, AND COMPLETENESS (CTAC)

This form must be completed, signed by the "Responsible Official" designated for the facility or emission unit, and sent with each submission of documents (i.e., application forms, updates to applications, reports, or any information required by a part 71 permit).

A. Responsible Official

Name: (Last) Van Hoorn (First) Curt (MI)

Title Senior Vice President, Arrow Operations

Street or P.O. Box 10702 Highway 73

City Keene State ND ZIP 58847 -

Telephone (701) - 675 Ext. 8602 Facsimile () -

B. Certification of Truth, Accuracy and Completeness (to be signed by the responsible official)

I certify under penalty of law, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed) (b) (6)

Name (typed) Curt Van Hoorn Date: 10 / 29 / 19

**INSTRUCTIONS FOR CTAC
CERTIFICATION OF TRUTH, ACURACY, and COMPLETENESS**

Information Collection Burden Estimates

The public reporting and recordkeeping burden for this collection of information is estimated to average 247 hours per respondent per year. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

DETAILED INSTRUCTIONS

This form is for the responsible official to certify that submitted documents (i.e., permit applications, updates to application, reports, and any other information required to be submitted as a condition of a permit) are true, accurate, and complete.

This form should be completed and submitted with each set of documents sent to the permitting authority. It may be used at time of initial application, at each step of a phased application submittal, for application updates, as well as to accompany routine submittals required as a term or condition of a permit.

Section A - Title V permit applications must be signed by a responsible official. The definition of responsible official can be found at 40 CFR 70.2.

Section B - The responsible official must sign and date the certification of truth, accuracy and completeness. This should be done after all application forms are complete and the responsible official has reviewed the information. Normally this would be the last form completed before the package of forms is mailed to the permitting authority.

Instructions for Spreadsheet Template

Purpose:

This spreadsheet template was designed by the U.S. EPA to facilitate annual reporting for Oil and Gas Facilities under 40 CFR part 60, subpart OOOOa. CEDRI is accessed through the EPA's Central Data Exchange (<https://cdx.epa.gov>)

Electronic reporting:

Electronic submission of annual reports through the EPA's Compliance and Emissions Data Reporting (CEDRI) is required under §60.5420a(b).

The CEDRI spreadsheet template upload feature allows you to submit data in a single report for a single facility or multiple facilities, as well as multiple sites, using this EPA provided Excel workbook. Data for the site(s) must be entered into the worksheet labeled "Site Information" in this Excel workbook. Each row in the "Site Information" worksheet includes the data for a single site. The Site Record No. will be used to match the information on each tab to the appropriate site.

IMPORTANT: For each site/facility record found in the "Site Information" worksheet, you may reference a single file attachment that includes all information for each citation found in the workbook or provide individual file names for each individual citation record. In the examples provided in the workbook, we provide both as an example.

The spreadsheet must be uploaded into CEDRI as a single ZIP file, which must include this Excel workbook and any related attachments that were referenced in any of the worksheets found in the workbook (e.g., the Certification file found in the "Site Information" worksheet).

Note: If you are uploading file attachments for your report, the uploaded files may be in any format (e.g., zip, docx, PDF). If you would like to include an Excel file(s) as an attachment, you must first zip the excel file(s) into a separate ZIP file to the master ZIP file that will be uploaded into CEDRI.

Once all data have been entered in the worksheet, combine this Excel workbook and all attachment files (including any ZIP file containing separate excel file(s), if applicable) into a single ZIP file for upload to CEDRI.

Please ensure your report includes all of the required data elements found in the listed citations below for this spreadsheet upload submission.

Do not submit confidential business information (CBI) to EPA via CEDRI. If you are required to submit a report in CEDRI, you must submit the report via CEDRI with the CBI omitted and mail a complete report, including any information claimed to be CBI, to EPA on a compact disc, flash drive, or other commonly used electronic storage media via U.S. postal service. You must mark the outside of the digital storage media as CBI and then identify electronically within the digital storage media the specific information that is claimed as CBI. Mail the media to the address in the referencing federal regulation. If no address is specified, mail the media to:

U.S. EPA/OAQPS/CORE CBI Office Attention: Group Leader,
Measurement Policy Group MD C404-02
4930 Old Page Rd
Durham, North Carolina 27703



You must submit annual reports containing the information specified in paragraphs (b)(1) through (8) and (12) of this section. You must submit annual reports following the procedure specified in paragraph (b)(11) of this section.

§60.5420a What are my notification, reporting, and recordkeeping requirements?

(b) Reporting requirements. You must submit annual reports containing the information specified in paragraphs (b)(1) through (8) and (12) of this section and performance test reports as specified in paragraph (b)(9) or (10) of this section, if applicable, except as provided in paragraph (b)(13) of this section. You must submit annual reports following the procedure specified in paragraph (b)(11) of this section. The initial annual report is due no later than 90 days after the end of the initial compliance period as determined according to §60.5410a. Subsequent annual reports are due no later than same date each year as the initial annual report. If you own or operate more than one affected facility, you may submit one report for multiple affected facilities provided the report contains all of the information required as specified in paragraphs (b)(1) through (8) of this section, except as provided in paragraph (b)(13) of this section. Annual reports may coincide with title V reports as long as all the required elements of the annual report are included. You may arrange with the Administrator a common schedule on which reports required by this part may be submitted as long as the schedule does not extend the reporting period.

(1) The general information specified in paragraphs (b)(1)(i) through (iv) of this section for all reports.

(i) The company name, facility site name associated with the affected facility, US Well ID or US Well ID associated with the affected facility, if applicable, and address of the affected facility. If an address is not available for the site, include a description of the site location and provide the latitude and longitude coordinates of the site in decimal degrees to an accuracy and precision of five (5) decimals of a degree using the North American Datum of 1983.

(ii) An identification of each affected facility being included in the annual report.

(iii) Beginning and ending dates of the reporting period.

(iv) A certification by a certifying official of truth, accuracy, and completeness. This certification shall state that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

(2) For each well affected facility, the information in paragraphs (b)(2)(i) through (iii) of this section.

(i) Records of each well completion operation as specified in paragraphs (c)(1)(i) through (iv) and (vi) of this section, if applicable, for each well affected facility conducted during the reporting period. In lieu of submitting the records specified in paragraph (c)(1)(i) through (iv) of this section, the owner or operator may submit a list of the well completions with hydraulic fracturing completed during the reporting period and the records required by paragraph (c)(1)(v) of this section for each well completion.

(ii) Records of deviations specified in paragraph (c)(1)(ii) of this section that occurred during the reporting period.

(iii) Records specified in paragraph (c)(1)(vi) of this section, if applicable, that support a determination under 60.5432a that the well affected facility is a low pressure well as defined in 60.5430a.

(3) For each centrifugal compressor affected facility, the information specified in paragraphs (b)(3)(i) through (iv) of this section.

(i) An identification of each centrifugal compressor using a wet seal system constructed, modified or reconstructed during the reporting period.

(ii) Records of deviations specified in paragraph (c)(2) of this section that occurred during the reporting period.

(iii) If required to comply with §60.5380a(a)(2), the records specified in paragraphs (c)(6) through (11) of this section.

(iv) If complying with §60.5380a(a)(1) with a control device tested under §60.5413a(d) which meets the criteria in §60.5413a(d)(11) and §60.5413a(e), records specified in paragraph (c)(2)(i) through (c)(2)(vi) of this section for each centrifugal compressor using a wet seal system constructed, modified or reconstructed during the reporting period.

(4) For each reciprocating compressor affected facility, the information specified in paragraphs (b)(4)(i) and (ii) of this section.

(i) The cumulative number of hours of operation or the number of months since initial startup or since the previous reciprocating compressor rod packing replacement, whichever is later. Alternatively, a statement that emissions from the rod packing are being routed to a process through a closed vent system under negative pressure.

(ii) Records of deviations specified in paragraph (c)(3)(ii) of this section that occurred during the reporting period.

(5) For each pneumatic controller affected facility, the information specified in paragraphs (b)(5)(i) through (iii) of this section.

(i) An identification of each pneumatic controller constructed, modified or reconstructed during the reporting period, including the identification information specified in §60.5390a(b)(2) or (c)(2).

(ii) If applicable, documentation that the use of pneumatic controller affected facilities with a natural gas bleed rate greater than 5 standard cubic feet per hour are required and the reasons why.

(iii) Records of deviations specified in paragraph (c)(4)(v) of this section that occurred during the reporting period.

(5) For each storage vessel affected facility, the information in paragraphs (b)(6)(i) through (vii) of this section.

(i) An identification, including the location, of each storage vessel affected facility for which construction, modification or reconstruction commenced during the reporting period. The location of the storage vessel shall be in latitude and longitude coordinates in decimal degrees to an accuracy and precision of five (5) decimals of a degree using the North American Datum of 1983.

(ii) Documentation of the VOC emission rate determination according to §60.5365a(e) for each storage vessel that became an affected facility during the reporting period or is returned to service during the reporting period.

(iii) Records of deviations specified in paragraph (e)(5)(iii) of this section that occurred during the reporting period.

(iv) A statement that you have met the requirements specified in §60.5410a(h)(2) and (3).

(v) You must identify each storage vessel affected facility that is removed from service during the reporting period as specified in §60.5395a(c)(1)(ii), including the date the storage vessel affected facility was removed from service.

(vi) You must identify each storage vessel affected facility returned to service during the reporting period as specified in §60.5395a(c)(3), including the date the storage vessel affected facility was returned to service.

(vii) If complying with §60.5395a(a)(2) with a control device tested under §60.5413a(d) which meets the criteria in §60.5413a(d)(11) and §60.5413a(e), records specified in paragraphs (c)(5)(v)(A) through (F) of this section for each storage vessel constructed, modified, reconstructed or returned to service during the reporting period.

(7) For the collection of fugitive emissions components at each well site and the collection of fugitive emissions components at each compressor station within the company-defined area, the records of each monitoring survey including the information specified in paragraphs (b)(7)(i) through (vii) of this section. For the collection of fugitive emissions components at a compressor station, if a monitoring survey is waived under §60.5397a(g)(5), you must include in your annual report the fact that a monitoring survey was waived and the calendar months that make up the quarterly monitoring period for which the monitoring survey was waived.

(i) Date of the survey.

(ii) Beginning and end time of the survey.

(iii) Name of operator(s) performing survey. If the survey is performed by optical gas imaging, you must note the training and experience of the operator.

(iv) Ambient temperature, sky conditions, and maximum wind speed at the time of the survey.

(v) Monitoring instrument used.

(vi) Any deviations from the monitoring plan or a statement that there were no deviations from the monitoring plan.

(vii) Number and type of components for which fugitive emissions were detected.

(viii) Number and type of fugitive emissions components that were not repaired as required in §60.5397a(h).

(ix) Number and type of difficult-to-monitor and unsafe-to-monitor fugitive emission components monitored.

(x) The date of successful repair of the fugitive emissions component.

(xi) Number and type of fugitive emission components placed on delay of repair and explanation for each delay of repair.

(xii) Type of instrument used to resurvey a repaired fugitive emissions component that could not be repaired during the initial fugitive emissions finding.

(8) For each pneumatic pump affected facility, the information specified in paragraphs (b)(8)(i) through (iii) of this section.

(i) For each pneumatic pump that is constructed, modified or reconstructed during the reporting period, you must provide certification that the pneumatic pump meets one of the conditions described in paragraphs (b)(8)(i)(A), (B) or (C) of this section.

(A) No control device or process is available on site.

(B) A control device or process is available on site and the owner or operator has determined in accordance with §60.5393a(b)(5) that it is technically infeasible to capture and route the emissions to the control device or process.

(C) Emissions from the pneumatic pump are routed to a control device or process. If the control device is designed to achieve less than 95 percent emissions reduction, specify the percent emissions reduction the control device is designed to achieve.

(ii) For any pneumatic pump affected facility which has been previously reported as required under paragraph (b)(8)(i) of this section and for which a change in the reported condition has occurred during the reporting period, provide the identification of the pneumatic pump affected facility and the date it was previously reported and a certification that the pneumatic pump meets one of the conditions described in paragraphs (b)(8)(i)(A), (B) or (C) or (D) of this section.

(A) A control device has been added to the location and the pneumatic pump now reports according to paragraph (b)(8)(i)(C) of this section.

(B) A control device has been added to the location and the pneumatic pump affected facility now reports according to paragraph (b)(8)(i)(B) of this section.

(C) A control device or process has been removed from the location or otherwise is no longer available and the pneumatic pump affected facility now report according to paragraph (b)(8)(i)(A) of this section.

(D) A control device or process has been removed from the location or is otherwise no longer available and the owner or operator has determined in accordance with §60.5393a(b)(5) through an engineering evaluation that it is technically infeasible to capture and route the emissions to another control device or process.

(iii) Records of deviations specified in paragraph (c)(16)(ii) of this section that occurred during the reporting period.

...

(12) You must submit the certification signed by the qualified professional engineer according to §60.5411a(d) for each closed vent system routing to a control device or process.

(11) You must submit reports to the EPA via the CEDRI. (CEDRI can be accessed through the EPA's CDX (<https://cdx.epa.gov/>)). You must use the appropriate electronic report in CEDRI for this subpart or an alternate electronic file format consistent with the extensible markup language (XML) schema listed on the CEDRI Web site (<https://www3.epa.gov/ttn/chief/cedri/>). If the reporting form specific to this subpart is not available in CEDRI at the time that the report is due, you must submit the report to the Administrator at the appropriate address listed in §60.4. Once the form has been available in CEDRI for at least 90 calendar days, you must begin submitting all subsequent reports via CEDRI. The reports must be submitted by the deadlines specified in this subpart, regardless of the method in which the reports are submitted.

40 CFR Part 63—Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2013—40.142(a)(2) Annual Report
For each affected facility, an owner or operator must include the information specified in paragraphs (b)(2)(i) through (iv) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

SITE INFORMATION										ALTERNATIVE ADDRESS INFORMATION (IF NO PHYSICAL ADDRESS AVAILABLE FOR SITE *)			REPORTING INFORMATION		PR Certification	ADDITIONAL INFORMATION		
Facility Record No. * (Field value will automatically generate if a value is not entered.)	Company Name * (40.142(a)(2)(i))	Facility Site Name * (40.142(a)(2)(ii))	US land ID or US land ID Associated with the Affected Facility, if applicable. * (40.142(a)(2)(iii))	Address of Affected Facility * (40.142(a)(2)(iv))	Address 2	City *	County *	State Abbreviation *	Zip Code *	Responsible Agency Facility ID (State Facility Identifier)	Description of Site Location (40.142(a)(2)(v))	Latitude of the Site (decimal degrees to 5 decimal places using the North American Datum of 1983) (40.142(a)(2)(vi))	Longitude of the Site (decimal degrees to 5 decimal places using the North American Datum of 1983) (40.142(a)(2)(vii))	Beginning Date of Reporting Period * (40.142(a)(2)(viii))	Ending Date of Reporting Period * (40.142(a)(2)(ix))	Please provide the name that certifies the certification signed by a qualified professional engineer for each closed vent system meeting the criteria of this section. * (40.142(a)(2)(x)) Please provide only one file per record.	Please enter any additional information.	Enter associated file name reference.
e.g.: ABC Company	e.g.: XYZ Compression Station	e.g.: 12345 ABCDEFGH	e.g.: 123 Main Street	e.g.: Suite 100	e.g.: Brooklyn	e.g.: Kings County	e.g.: NY	e.g.: 11221	e.g.: 7 miles NE of the intersection of Hwy 123 and Hwy 456	e.g.: 34.12345	e.g.: 88.12345	e.g.: 01/01/2014	e.g.: 06/30/2014	e.g.: Certification.pdf or 2013.compressorStation.pdf	e.g.: 2013.compressorStation.pdf	No closed vent systems required for this site.		

(b) (9)

The asterisk (*) next to each field indicates that the corresponding field is required.

		\$60.5432a Low Pressure Wells	All Well Completions	Well Affected Facilities Required to Comply with \$60.5375a(a) and \$60.5430a(h)									
Facility Record No. * (Select from dropdown list - may need to scroll up)	United States Well Number * (\$60.5430a(b)(2)(ii))	Records of deviations where well completion operations with hydraulic fracturing were not performed in compliance with the requirements specified in § 60.5375a. * (\$60.5430a(b)(2)(i) and \$60.5430a(c)(3)(ii))	Please provide the file name that contains the record of Determination and Supporting Inputs and Calculations * (\$60.5430a(d)(2)(ii) and \$60.5430a(c)(3)(iv)) Please provide only one file per record.	Well Completion ID * (\$60.5420a(b)(2)(i) and \$60.5420a(c)(3)(i))	Well Location * (\$60.5430a(b)(2)(i) and \$60.5430a(c)(3)(ii)(A)-(D))	Date of Onset of Flowback Following Hydraulic Fracturing or Re-fracturing * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Time of Onset of Flowback Following Hydraulic Fracturing or Re-fracturing * (\$60.5420a(b)(2)(i) and \$60.5420a(c)(3)(ii)(A)-(D))	Date of Each Attempt to Direct Flowback to a Separator * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Time of Each Attempt to Direct Flowback to a Separator * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Date of Each Occurrence of Returning to the Initial Flowback Stage * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Time of Each Occurrence of Returning to the Initial Flowback Stage * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Date Well Shut In and Flowback Equipment Permanently Disconnected or the Startup of Production * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))	Time Well Shut In and Flowback Equipment Permanently Disconnected or the Startup of Production * (\$60.5420a(b)(2)(ii) and \$60.5420a(c)(3)(ii)(B)-(D))
e.g.: 12-345-67890-12 1 33-053-90303		e.g.: On October 12, 2015, a separator was not onsite for the first 3 hours of the flowback	e.g.: lowpressure.pdf or XYZCompressorStation.pdf	e.g.: Completion ABC	e.g.: 34.32843 latitude -100.12345 longitude	e.g.: 10/16/15	e.g.: 10 a.m.	e.g.: 10/16/15	e.g.: 10 a.m.	e.g.: 10/16/15	e.g.: 10 a.m.	e.g.: 10/16/15	e.g.: 10 a.m.

(b) (9)

5375a(1)

Exceptions Under §60.5375a(x)(3) - Technically Infeasible to Route to the Gas Flow Line or Collection System, Re-inject into a Well, Use as an Onsite Fuel Source, or Use for Another Use(1)

Duration of Flowback in Hours * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Duration of Recovery in Hours * (Not Required for Wells Complying with §60.5375a(2) (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A))	Disposition of Recovery * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Duration of Combustion in Hours * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Duration of Venting in Hours * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Reason for Venting in lieu of Capture or Combustion * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Well Location * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Specific Exception Claimed * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Starting Date for the Period the Well Operated Under the Exception * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Ending Date for the Period the Well Operated Under the Exception * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Why the Well Meets the Claimed Exception * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Name of Nearest Gathering Line * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Location of Nearest Gathering Line * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))	Technical Considerations Preventing Routing to this Line * (§60.5420a(b)(2)(i) and §60.5420a(c)(1)(i)(A)-(B))
e.g.: 5	e.g.: 5	e.g.: Used as onsite fuel	e.g.: 5	e.g.: 5	e.g.: No onsite storage or combustion unit was available at the time of completion.	e.g.: 34.12345 latitude, -103.12345 longitude	e.g.: Technical infeasibility under §60.5375a(x)(3)	e.g.: 10/26/2016	e.g.: 10/28/2016	e.g.: As further described in this report, technical issues prevented the use of the gas for useful purposes.	e.g.: ABC Line	e.g.: 100 miles away at 34.12345 latitude, -103.12345 longitude	e.g.: right of use

of Purpose Served by a Purchased Fuel or Raw Material

Well Affected Facilities Meeting the Criteria of §60.5375(a)(1)(ii)(A) - Not Hydraulically Fractured/Refractured with Liquids or Do Not Generate Condensate, Intermediate Hydrocarbon Liquids, or Produced Water (No LK)

Capture, Retention, and Reuse Technologies Considered *	Aspects of Gas or Equipment Preventing the Use of Recovered Gas as a Fuel Onsite *	Technical Considerations Preventing Use of Recovered Gas for Other Useful Purpose *	Additional Reasons for Technical Infeasibility *	Well location*	Date of Onset of Flowback Following Hydraulic Fracturing or Refracturing *	Time of Onset of Flowback Following Hydraulic Fracturing or Refracturing *	Date Well Shut In and Flowback Equipment Permanently Disconnected or the Startup of Production *	Time Well Shut In and Flowback Equipment Permanently Disconnected or the Startup of Production *	Duration of Flowback in Hours *	Duration of Combustion in Hours *	Duration of Venting in Hours *	Reason for Venting in lieu of Capture or Combustion *	Does well still meet the conditions of	If applicable, Date Well Completion Operation Stopped *
(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))	(§60.5430a)(b)(2)(i) and §60.5430a(c)(1)(ii)(A)-(B))
e.g.: on-site generators	e.g.: gas quality	e.g.: gas quality	e.g.: well damage on clean up	e.g.: 34.12345 latitude -101.12345 longitude	e.g.: 10/16/16	e.g.: 10 a.m.	e.g.: 10/16/16	e.g.: 10 a.m.	e.g.: 5	e.g.: 5	e.g.: 5	e.g.: No onsite storage or combustion unit was available at the time of completion.	e.g.: Yes	e.g.: 10/16/16

Well Collection System or Separator Check				Well Affected Facilities Required to Comply with Both §60.5375(a)(1) and (3) Using a Digital Photo in lieu of Records Required by §60.5420a(c)(1)(i) through (iv)	Well Affected Facilities Meeting the Criteria of §60.5375(a)(2) - <100 scf of Gas per Stock Tank Barrel of Oil Produced		
<p>If applicable: Time Well Completion Operation Stopped *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C)(2))</p>	<p>If applicable: Date Separator Installed *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C)(2))</p>	<p>If applicable: Time Separator Installed *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C)(2))</p>	<p>Are there liquids collection at the well site? Based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete. *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C)(2))</p>	<p>Please provide the file name that contains the Digital Photograph with Date Taken and Latitude and Longitude Imbedded (or with Visible GPS), Showing Required Equipment</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C))</p> <p>Please provide only one file per record.</p>	<p>Well Location*</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(B))</p>	<p>Please provide the file name that contains the Record of Analysis Performed to Check Well Mouth</p> <p>§60.5375(a)(2), including GCH Values for Established Leases and Data from Wells in the Same Basin and Field *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(B))</p> <p>Please provide only one file per record.</p>	<p>Does the well meet the requirements of §60.5375(a)(2)?</p> <p>Based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete. *</p> <p>(§60.5420a(b)(2)(i) and §60.5420a(c)(1)(ii)(C))</p>
e.g.: 10 a.m.	e.g.: 10/16/15	e.g.: 10 a.m.	e.g.: No	e.g.: completion1.pdf or XYZCompressorStation.pdf	e.g.: 34.12345 latitude, -101.12345 longitude	e.g.: GCHresults.pdf or XYZCompressorStation.pdf	e.g.: Yes

For the collection of fugitive emissions components at each well site and the collection of fugitive emissions components at each compressor station within the company-defined area, an owner or operator must include the records of each monitoring survey including the information specified in paragraphs (h)(7)(i) through (h)(8) of this section in all annual reports.

The asterisk (*) next to each field indicates that the corresponding field is required.

Facility Record No. * (Delete from dropdown list - may need to reupload)	Identification of Each Affected Facility * (60.5420a(b)(3))	Date of Survey * (60.5420a(b)(7)(i))	Survey Begin Time * (60.5420a(b)(7)(ii))	Survey End Time * (60.5420a(b)(7)(iii))	Name of Surveyor * (60.5420a(b)(7)(iv))	Ambient Temperature During Survey * (60.5420a(b)(7)(v))	Sky Conditions During Survey * (60.5420a(b)(7)(vi))	Maximum Wind Speed During Survey * (60.5420a(b)(7)(vii))	Monitoring Instrument Used * (60.5420a(b)(7)(viii))	Deviations From Monitoring Plan (If none, state none.) * (60.5420a(b)(7)(ix))	Type of Component for which Fugitive Emissions Detected * (60.5420a(b)(7)(x))	Number of Each Component Type for which Fugitive Emissions Detected * (60.5420a(b)(7)(xi))	Type of Component Not Required as Required in 60.5397a(b) * (60.5420a(b)(7)(xii))	Number of Each Component Type Not Required as Required in 60.5397a(b) * (60.5420a(b)(7)(xiii))	Type of Offshore-to-Monitor Components Monitored * (60.5420a(b)(7)(xiv))
e.g.: Well Site ABC	e.g.: R/13/17	e.g.: 10:00 am	e.g.: 1:00 pm	e.g.: John Smith	e.g.: 90°F	e.g.: Sunny, no clouds	e.g.: 2 mph	e.g.: Company ABC optical gas imaging camera	e.g.: None	e.g.: Valve	e.g.: 3	e.g.: Valve	e.g.: 1	e.g.: Valve	
1 Boreque 68a		11/14/2018	11:30	12:10 Monica Wilson	42°F	Cloudy	16 mph	FLIR GF120 Camera	None	N/A		0 N/A		0 N/A	
1 Boreque 68a		6/7/2019	10:52	12:13 Cole Hecker	79°F	Cloudy	15.2 mph	FLIR GF120 Camera	None	N/A		0 N/A		0 N/A	

Number of Each Difficult-to-Monitor Component Type Monitored *	Type of Unsafe-to-Monitor Component Monitored *	Number of Each Unsafe-to-Monitor Component Type Monitored *	Date of Successful Repair of Fugitive Emissions Component *	Type of Component Placed on Delay of Repair *	Number of Each Component Type Placed on Delay of Repair *	Explanation for Delay of Repair *	Type of Instrument Used to Remedy Repaired Components Not Replaced During Original Survey *	OGI	Compressor Station Affected Facility Only	
								Training and Experience of Surveyor *	Was a monitoring survey waived under § 60.539-7(a)(2)? *	If a monitoring survey was waived, the calendar month that make up the quarterly monitoring period for which the monitoring survey was waived, *
N/A; 1	e.g.: Value	e.g.: 1	e.g.: 11/10/18	e.g.: Value	e.g.: 1	e.g.: Unsafe to repair until next shutdown	e.g.: Company ABC optical gas imaging camera	e.g.: Trained Thermographer; completed 40-hour course at 202 Training Center. Has 10 years of experience with OGI surveys.	e.g.: Yes	e.g.: January, February, and March
	0 N/A 0 N/A		0 N/A 0 N/A	N/A N/A		0 N/A 0 N/A	N/A N/A	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has two and a half years experience with OGI Surveys. Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has six months experience with OGI Surveys.		

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.542(b)(6) Annual Report
For each affected facility, an owner or operator must include the information specified in paragraphs (b)(3)(i) through (b)(6) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.																		
SITE INFORMATION										ALTERNATIVE ADDRESS INFORMATION (IF NO PHYSICAL ADDRESS AVAILABLE FOR SITE *)			REPORTING INFORMATION		PE Certification	ADDITIONAL INFORMATION		
Facility Record No. * (Field value will automatically generate if a value is not entered.)	Company Name * (§60.542(b)(3)(i))	Facility Site Name * (§60.542(b)(3)(ii))	US Well ID or US Well ID Associated with the Affected Facility, if applicable. * (§60.542(b)(1)(i))	Address of Affected Facility * (§60.542(b)(1)(ii))	Address 2	City *	County *	State Abbreviation *	Zip Code *	Responsible Agency Facility ID (State Facility Identifier)	Description of Site Location (§60.542(b)(1)(iii))	Latitude of the Site (decimal degrees to 5 decimal using the North American Datum of 1983) (§60.542(b)(1)(iv))	Longitude of the Site (decimal degrees to 5 decimal using the North American Datum of 1983) (§60.542(b)(1)(v))	Beginning Date of Reporting Period * (§60.542(b)(1)(vi))	Ending Date of Reporting Period * (§60.542(b)(1)(vii))	Please provide the file name that contains the certification signed by a qualified professional engineer for each closed vent system routing to a control device or process. * (§60.542(b)(12)) Please provide only one file per record.	Please enter any additional information.	Enter associated file name reference.
e.g.: ABC Company	e.g.: XYZ Compressor Station	e.g.: 12-945-67890-12	e.g.: 123 Main Street	e.g.: Suite 100	e.g.: Brooklyn	e.g.: Kings County	e.g.: NY	e.g.: 11221	e.g.: 7 miles NE of the intersection of Hwy 123 and Hwy 456	e.g.: 34.12345	e.g.: -101.12345	e.g.: 01/01/2016	e.g.: 06/30/2016	e.g.: Certification.pdf or XYZCompressorStation.pdf	e.g.: additional.zip or XYZCompressorStation.pdf	No closed vent systems required for this site.		
2 Crooked Equity Parts Arrow State 16	13-053-90266	St. #16: SWNW Section 16, T150N, R1 Keene	McKenzie	ND	58847 Exempt	0.6 miles North on Co Rte 18	(b) (9)	8/2/2018	8/2/2018	No closed vent systems required for this site.								
3 Crooked Equity Parts Arrow State 16-2	13-053-60388	St. #16: SWNW Section 16, T150N, R1 Keene	McKenzie	ND	58847 Exempt	0.6 miles North on Co Rte 15	(b) (9)	8/2/2018	8/2/2018	No closed vent systems required for this site.								

40 CFR Part 60—Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 – 60.5425a(b) Annual Report
For each well affected facility, an owner or operator must include the information specified in paragraphs (b)(2) through (9) of this section in all annual reports.

The asterisk (*) next to each field indicates that the corresponding field is required.

		60.5425a Low Pressure Wells	All Well Completions	Well Affected Facilities Required to Comply with 60.5475a(x) and 60.5475b									
Facility Record No. * (United States Well Number* (60.5425a(b)(3)(i)) (United States Well Number* (60.5425a(b)(3)(i))	Records of deviations where well completion operations with hydraulic fracturing were not performed in compliance with the requirements specified in § 60.5475a. * (60.5475a(b)(7)(i) and 60.5475a(b)(7)(ii))	Please provide the file name that contains the Record of Determination and Supporting Input and Calculations * (60.5475a(b)(2)(ii) and 60.5475a(b)(3)(vii)) Please provide only one file per record.	Well Completion ID * (60.5475b(b)(2)(i) and 60.5475b(b)(3)(i))	Well Location * (60.5475b(b)(7)(i) and 60.5475b(b)(7)(ii))	Date of Onset of Flowback Following Hydraulic Fracturing or Refracturing * (60.5475b(b)(2)(ii) and 60.5475b(b)(3)(ii))	Date of Onset of Flowback Following Hydraulic Fracturing or Refracturing * (60.5475b(b)(2)(ii) and 60.5475b(b)(3)(ii))	Date of Each Attempt to Direct Flowback to a Separator * (60.5475b(b)(7)(i) and 60.5475b(b)(7)(ii))	Date of Each Attempt to Direct Flowback to a Separator * (60.5475b(b)(7)(i) and 60.5475b(b)(7)(ii))	Date of Each Occurrence of Returning to the Initial Flowback Stage * (60.5475b(b)(2)(ii) and 60.5475b(b)(3)(ii))	Date of Each Occurrence of Returning to the Initial Flowback Stage * (60.5475b(b)(2)(ii) and 60.5475b(b)(3)(ii))	Date Well Shut-In and Flowback Equipment Permanently Disconnected or the Start-up of Production * (60.5475b(b)(7)(i) and 60.5475b(b)(7)(ii))	Date Well Shut-In and Flowback Equipment Permanently Disconnected or the Start-up of Production * (60.5475b(b)(7)(i) and 60.5475b(b)(7)(ii))	
e.g.: 12-040-07000-12	e.g.: On October 11, 2016, a separator was vented to the first 7 hours of the flowback period.	e.g.: Flowback.pdf or 102/separator-flowback.pdf	e.g.: Completion ABC	e.g.: 34-22345 latitude and 105-12345 longitude	e.g.: 10/10/16	e.g.: 10 a.m.	e.g.: 10/10/16	e.g.: 10 a.m.	e.g.: 10/10/16	e.g.: 10 a.m.	e.g.: 10/10/16	e.g.: 10 a.m.	

(b) (9)

5375a(2)

Exceptions Under 605.5375(a)(2) - Technically Infeasible to Route to the Gas Flow Line or Collection System, for Inject into a Well, Use as an Onsite Fuel Source, or Use for Another Use(s)

Duration of Flareback in Hours *	Duration of Recovery in Hours *	Disposition of Recovery *	Duration of Combustion in Hours *	Duration of Venting in Hours *	Reasons for Venting in lieu of Capture or Combustion *	Well Location *	Specific Description (Claimed) *	Starting Date for the Period the Well Operated Under the Exception *	Ending Date for the Period the Well Operated Under the Exception *	Why the Well Meets the Claimed Exception *	Name of Nearest Gathering Line *	Location of Nearest Gathering Line *	Technical Considerations Preventing Routing to Well Line *
(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	Not Required for Wells Complying with 605.5375(c)(3) (605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)	(605.5420a)(6)(7)(i) and (605.5420a)(6)(7)(ii)-(iii)
e.g.: 5	e.g.: 5	e.g.: Used as onsite fuel	e.g.: 5	e.g.: 5	e.g.: No onsite storage or combustion unit was available at the time of completion	e.g.: 34.22345 latitude, 100.12345 longitude	e.g.: Technical infeasibility under 605.5375(a)(2)	e.g.: 10/16/2016	e.g.: 10/16/2016	e.g.: As further described in this report, technical issues prevented the use of the gas for useful gas plants	e.g.: ABC Line	e.g.: 100 miles away at 34.12345 latitude, 100.12345 longitude	e.g.: right of use

of Purpose Served by a Purchased Fuel or Raw Material

Well-Affected Facilities Meeting the Criteria of § 60.537(a)(2)(B)(A) - Not Hydraulically Fractured/Refractured with Liquids or Do Not Generate Condensate, Intermediate Hydrocarbon Liquids, or Produced Water (See List

Capture, Storage, and Reuse Technologies Considered *	Aspects of Gas or Equipment Preventing Use of Recovered Gas as a Fuel Quality *	Technical Considerations Preventing Use of Recovered Gas for Other Useful Purposes *	Additional Reasons for Technical Infeasibility *	Well Location*	Date of Onset of Flowback Following Hydraulic Fracturing or Refracturing *	Time of Onset of Flowback Following Hydraulic Fracturing or Refracturing *	Date Well Shut In and Flowback Equipment Permanently Disconnected or the Start of Production *	Time Well Shut In and Flowback Equipment Permanently Disconnected or the Start of Production *	Duration of Flowback in Hours *	Duration of Combustion in Hours *	Duration of Venting in Hours *	Reason for Venting in lieu of Capture or Combustion *	Does well still meet the conditions of § 60.537(a)(2)(B)(A) ? *	If applicable Date Well Completion Operation Stopped *
(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))	(§ 60.542(a)(2)(i) and § 60.542(a)(3)(i)(A) (B))
e.g.: on-site generators	e.g.: gas quality	e.g.: gas quality	e.g.: well damage or clean-up	e.g.: 34.12345 latitude, -100.12345 longitude	e.g.: 10/14/15	e.g.: 10 a.m.	e.g.: 1/15/16/16	e.g.: 10 a.m.	e.g.: 5	e.g.: 5	e.g.: 5	e.g.: No on-site storage or combustion unit was available at the time of completion.	e.g.: Yes	e.g.: 10/15/16

pH Collection System or Separator Drift				Well Affected Facilities Required to Comply with Item 540.537(a)(2) and (3) Using a Digital Photo in lieu of Records Required by 540.542(a)(3)(B) through (d)	Well Affected Facilities Meeting the Criteria of 540.537(a)(2) - (3) w/ a 1000 cc of Gas per Stock Tank Barrel of Oil Produced		
If applicable: Time Well Completion Operation Stopped * (540.542(a)(2)(i) and 540.542(a)(3)(i)(i)(i))	If applicable: Date Separator Installed + (540.542(a)(2)(ii) and 540.542(a)(3)(i)(i)(ii))	If applicable: Time Separator Installed + (540.542(a)(2)(iii) and 540.542(a)(3)(i)(i)(iii))	Are there liquids collection at the well site? Based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete. + (540.542(a)(2)(iv) and 540.542(a)(3)(i)(iv))	Please provide the file name that contains the Digital Photograph with Date Taken and Latitude and Longitude Indebted (or with Visible GPS, Showing Required Equipment (540.542(a)(2)(v) and 540.542(a)(3)(i)(v)) Please provide only one file per record.	Well location* (540.542(a)(2)(vi) and 540.542(a)(3)(i)(vi))	Please provide the file name that contains the Record of Analysis Performed to Clean Well Mouth (540.537(a)(4)), including O/SB Values for Established Issues and Data from Wells in the Same Basin and Field * (540.542(a)(2)(vii) and 540.542(a)(3)(i)(vii)) Please provide only one file per record.	Does the well meet the requirements of 540.537(a)(7)? Based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete. * (540.542(a)(2)(viii) and 540.542(a)(3)(i)(viii))
e.g. 10 a.m.	e.g. 10/10/16	e.g. 10 a.m.	e.g. No	e.g. completion.pdf or RT2CompressorStation.pdf	e.g. 34.12945 latitude, -101.15345 longitude	e.g. 10Records.pdf or RT2CompressorStation.pdf	e.g. Yes

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5420a(b) Annual Report

For the collection of fugitive emissions components at each well site and the collection of fugitive emissions components at each compressor station within the company-defined area, an owner or operator must include the records of each monitoring survey including the information specified in paragraphs (b)(7)(X) through (x) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

Facility Record No. *	Identification of Each Affected Facility *	Date of Survey *	Survey Begin Time *	Survey End Time *	Name of Surveyor *	Ambient Temperature During Survey *	Sky Conditions During Survey *	Maximum Wind Speed During Survey *	Monitoring Instrument Used *	Deviations From Monitoring Plan (If none, state none) *	Type of Component for which Fugitive Emissions Detected *	Number of Each Component Type for which Fugitive Emissions Detected *	Type of Component Not Repaired as Required in § 60.5397a(b) *	Number of Each Component Type Not Repaired as Required in § 60.5397a(b) *	Type of Difficult-to-Monitor Components Monitored *
	e.g.: Well Site ABC	e.g.: 8/13/17	e.g.: 10:00 am	e.g.: 1:00 pm	e.g.: John Smith	e.g.: 99°F	e.g.: Sunny, no clouds	e.g.: 2 mph	e.g.: Company ABC optical gas imaging camera	e.g.: None	e.g.: Valve	e.g.: 1	e.g.: Valve	e.g.: 1	e.g.: Valve
2	Arrow State 16	8/23/2018	9:00	9:44	Monica Hilton	65°F	Sunny	13 mph	FLIR GF 320 Camera	None	N/A	0	N/A	0	N/A
2	Arrow State 16	11/14/2018	12:17	13:25	Monica Hilton	42°F	Cloudy	18 mph	FLIR GF 320 Camera	None	N/A	0	N/A	0	N/A
2	Arrow State 16	6/7/2019	9:09	10:40	Cole Hecker	73°F	Cloudy	16.5 mph	FLIR GF 320 Camera	None	N/A	0	N/A	0	N/A
3	Arrow State 16-2	8/23/2018	9:00	9:44	Monica Hilton	65°F	Sunny	13 mph	FLIR GF 320 Camera	None	N/A	0	N/A	0	N/A
3	Arrow State 16-2	11/14/2018	12:17	13:25	Monica Hilton	42°F	Cloudy	18 mph	FLIR GF 320 Camera	None	Compressions Fitting	1	N/A	0	N/A
3	Arrow State 16-2	6/7/2019	9:09	10:40	Cole Hecker	73°F	Cloudy	16.5 mph	FLIR GF 320 Camera	None	N/A	0	N/A	0	N/A

Number of Each Difficult-to-Monitor Component Type Monitored * (§60.5420a)(6)(7)(ii))	Type of Unsafe-to-Monitor Component Monitored * (§60.5420a)(6)(7)(ii))	Number of Each Unsafe-to-Monitor Component Type Monitored * (§60.5420a)(6)(7)(ii))	Date of Successful Repair of Fugitive Emissions Component * (§60.5420a)(6)(7)(i))	Type of Component Placed on Delay of Repair * (§60.5420a)(6)(7)(ii))	Number of Each Component Type Placed on Delay of Repair * (§60.5420a)(6)(7)(ii))	Explanation for Delay of Repair * (§60.5420a)(6)(7)(ii))	Type of Instrument Used to Resurvey Repaired Components Not Repaired During Original Survey * (§60.5420a)(6)(7)(ii))	OGI	Compressor Station Affected Facility Only	
								Training and Experience of Surveyor * (§60.5420a)(6)(7)(ii))	Was a monitoring survey waived under § 60.5397a(g)(1)? * (§60.5420a)(6)(7))	If a monitoring survey was waived, the calendar months that make up the quarterly monitoring period for which the monitoring survey was waived. * (§60.5420a)(6)(7))
e.g.: 1	e.g.: Value	e.g.: 1	e.g.: 11/10/16	e.g.: Value	e.g.: 1	e.g.: Unsafe to repair until next shutdown	e.g.: Company ABC optical gas imaging camera	e.g.: Trained thermographer; completed 40-hour course at XYZ Training Center. Has 10 years of experience with OGI surveys.	e.g.: Yes	e.g.: January, February, and March
0 N/A	0 N/A	0 N/A	0 N/A	N/A	0 N/A	0 N/A	N/A	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has two and a half years experience with OGI Surveys.		
0 N/A	0 N/A	0 N/A	0 N/A	N/A	0 N/A	0 N/A	N/A	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has two and a half years experience with OGI Surveys.		
0 N/A	0 N/A	0 N/A	0 N/A	N/A	0 N/A	0 N/A	N/A	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has six months experience with OGI Surveys.		
0 N/A	0 N/A	0	12/14/2018	N/A	0 N/A	0 N/A	FLIR GF 320 Camera	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has two and a half years experience with OGI Surveys.		
0 N/A	0 N/A	0 N/A	0	N/A	0 N/A	0 N/A	N/A	Trained Optical Gas Imaging Thermographer; completed OGI Certification Training course through Infrared Training Center. Has six months experience with OGI Surveys.		